PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/764,818			ing Date 26/2004	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛			OTHER THAN OR SMALL ENTITY		
Н	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	<u> </u>	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),		N/A	LD NO	N/A		N/A	TEE (a)	i	N/A	TEE (0)	
┢	SEARCH FEE	or (c))	N/A		N/A		N/A		1	N/A		
H	(37 CFR 1.16(k), (i), EXAMINATION FE		N/A		N/A		N/A		ł	N/A		
	(37 CFR 1.16(o), (p), FAL CLAIMS	or (q))	minus 20 =				x \$ =		OR	x s =		
INE	CFR 1.16(i)) EPENDENT CLAIM	S	minus 3 =			ł	x s =			x s =		
(37	CFR 1.16(h))	If the	If the specification and draw		ns exceed 100	ł	~ *		ł	<u> </u>		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	ts of pap 50 (\$125 ional 50 :	n size fee due								
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								1			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								1	TOTAL		
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
LN:		CLAIMS	Г	HIGHEST	ST					Г		
	02/01/2007	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ĭ	Total (37 CFR 1.18())	* 56	Minus	~ 56	= 0]	X \$25 =	0	OR	x s =		
AMENDMENT	Independent (37 CFR 1.16(h))	• 4	Minus	···4	= 0	1	X \$100 =	0	OR	x s =		
	Application Size Fee (37 CFR 1.16(a))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(1))		Minus		=	1	x \$ =		OR	x s =		
Ž	Independent (37 CFR 1,16(h))	*	Minus	***	=	1	x \$ =		OR	x \$ =		
ä	Application Size Fee (37 CFR 1.16(s))]			1			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR			
									OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

This collection of information is equated by 37 CER 1.10. The information is required to obtain or retain a benefit by the public which is in life (and by the USETO to noceess) an implication. Confidentially is governed by 85 USE of 22 and 37 CER 1.4. If this collection is estimated to state 2 relativeste to complete in excluding patternity, preparing, and submitting the completed application form to the USETO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or segeocomes for reducing this burford, subsuld be sent to the CEMPT (information Officer, U.S. Patterni and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrius, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patternity, P.O. Box 1450, Alexandrius, VA 22313-1450, DR NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.